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~~Carlin~~ ~~Samuel~~

Essay on Cholera of the East.

by

Papad. March 24<sup>th</sup>  
1826

W. L. M. Calhoun

of

Philadelphia.

Ut solvere explicabo; nec tamen ut Pythius Apollo, certa ut sint  
et fixa, quae discas; sed ut hominibus, probabilis Conjectura  
sequatur.

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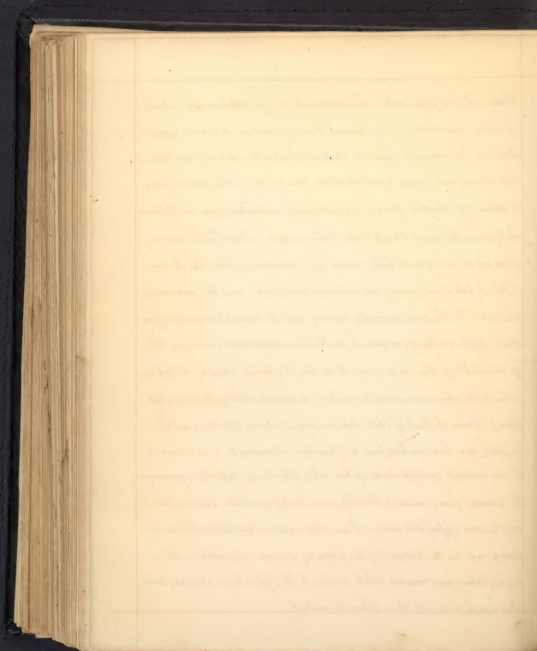
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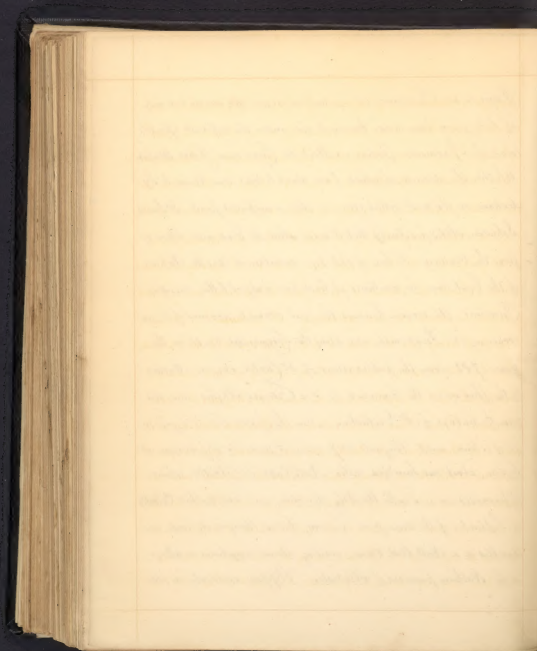
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From Man's first fall, when the fruit of his disobedience was  
expulsion from Eden to the present day, he has been subject to many  
ills; his punishments and his sufferings have been severe. We find  
him at one time nearly swept from the face of the Earth by the Deluge  
of Waters; at another famine strikes with destructive fury over the land  
and leaves but few to tell the story of his ravages. The Earth herself  
opens wide and vomits forth oceans of liquid fire, which like the im-  
petuous torrent, scouring all restraint burns man and his monuments  
for ever. Yet he, with difficulty arising from the ruins of his former splen-  
dour, still seeks for means of further annihilation. He seizes the  
implements of War and wishes to destroy his fellow, though at that very  
moment, he should himself be sinking under the deadly grasp of Reti-  
lence. From the last of these sources he has however been the greatest  
sufferer; for Envy has been his constant attendant; and it would  
be an almost endless task, if not altogether impossible, to enumerate  
the various forms under which, he has, at different times, swayed his  
scepter over oppressed man. From this immense multitude, I have se-  
lected one for the subject of the following remarks; one which, with a  
mighty arm, has caused whole nations to flee before him, striking dead,  
at a single blow, all those whom he overtook.



I refer to an Epidemic, not of modern origin, but which has only of late years been made known to us under the different appellations of *Spasmodic Cholera*, *Cholera Asiatica* and *Cholera Morbus*. Whether the disease, of which I am about to treat, was known to Sydenham, in its most violent form, is still a disputed point. Dr. Samuel Johnson states positively that it was, while Dr. Good and others affirm the contrary. It has of late been ascertained that the Nations of the East have, for centuries at least, been subject to this dreadful Epidemic. We receive however the first accurate account of it, as occurring at *Tinnevely* and along the *Coromandel Coast* in the year 1782, from the publications of Dr. Curtis, Surgeon attached to the Fleet under the Command of Sir Edward Hughes; and also from the writings of Dr. Girdlestone. From this period there is a gap in its existence until August 1817, when it made its appearance at *Behar*, about one hundred miles North East of Calcutta, whence it proceeded in a South Westwardly direction, and first reached Calcutta in September of the same year. Leaving this it changed its route and travelled in a North West course, visiting almost every town or village in the Northern provinces of Hindostan. It stopped suddenly in the

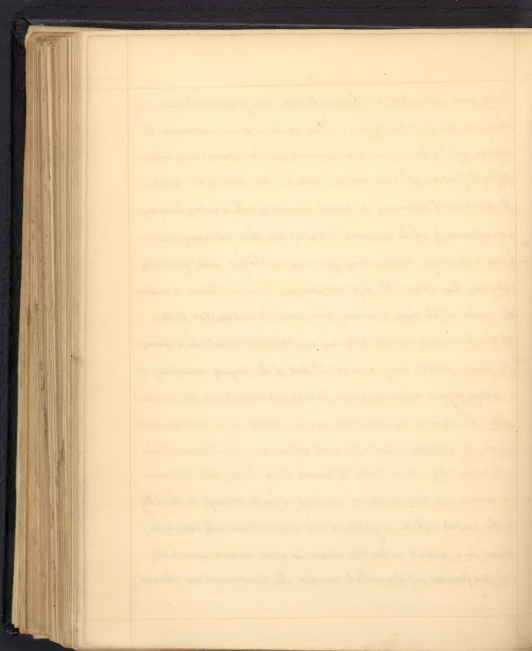


progress Northward, as if impeded by the range of Mountains near the borders of Tibet, it is seen gradually moving towards the South, spreading from one shore to the other. The settlements of Bombay and Goa, situated on the Malabar Coast, felt deeply in their turn its destructive power. The same progressive step did it pursue on the Eastern Coast, depopulating the whole Delta to the utmost point of the Ganges. Nor does it stop here, for we see it crossing the strait, which separates the Island of Ceylon from the Continent, and if possible, assuming a shape still more alarming. In the month of November 1819, as if rising from the Ocean, it takes possession of the Isle of France, thus far did it extend Westward. Nor was its progress more limited towards the East. It passed over in its course the Kingdoms of Siam & Malacca, Cochin China, visited Macao, the Portuguese settlement at the mouth of the River Niger, also Panton, and advanced some distance into the adjacent districts. A second time it leaves the Continent, and our attention is called to witness its ravages throughout the Philippine Isles, its principal force being spent in the neighbourhood of Manila. Such was the course of this Epidemic, during the years 1817. 18. 19, since which time it has again made its appearance in different sections of the East.

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I will first ask what is Cholera Morbus? how produced? and whether or not it is contagious? These questions I will endeavour to answer after I have given some account of it, as described by the different persons, who have written upon it; and first of Dr. Curtis. He mentions it as coming on almost invariably with a watery purging, accompanied by slight tenderness, but no spasm, then occurring some hours after, and commencing generally in the feet, and gradually extending themselves to the legs and thighs. Great prostration is induced the surface of the body becoming pale, and the extremities cold. At this period nausea and vomiting are added to the patient's suffering; the fluid ejected being similar to that of the purging, consisting of a watery liquid containing small particles of mucus; but no bile is observable. The danger in each case was proportionate to the rapidity, with which the spasms followed the first attack and the degree of force with which they seized upon the muscles of the Throat and Abdomen. He describes the kind of spasm, as being a fixed cramp in the belly of the muscle, which is gathered into a hard knot with excruciating pain. In a minute or less this relaxed, is again uncoiled, and lastly it passes from one set of muscles to another. The countenance now appears



a sallow and deathlike appearance the face seems small and even  
ly, except the jet black eyebrows. The mouth is a thin line, the  
the countenance seems very ghastly and the pulse is more distinct.  
The tongue is white and somewhat forced towards the root, great  
thirst and a strong desire for cold drinks, but no relief is afforded when  
they being instantly rejected. The head is scarcely ever agitated, can  
nothing does the mind seem to suffer for many retain their faculties,  
even after the pulsations of the heart ~~were~~ <sup>are no longer</sup> distinguished. A dense  
having endured some time, a clammy sweat breaks out over the  
whole body, which appears to be forced out by their violence. The finger  
nails become livid, the palms of the hands white and wrinkled.  
These latter symptoms pass away as before, followed by agitation.  
After the commencement of convulsions in the chest and in the  
very thing swallowed is immediately rejected as if by a convulsive  
contraction of the pharynx. This condition continues some hours,  
when the spasms abating the internal secretion seems now to  
cease and the patient soon sinks into insensibility.  
In this which is considered the most violent form of the Effluvia he has  
tried almost every mode of treatment, and according to his own



Indulgent with very little success. He places but little confidence in opiates except in the very forming stage of the complaint; and not even then unless combined with some powerful stimulant. The purgative plan he condemns altogether, after having tried it to every extent. Considering it a disease of Weakness or Debility (to all which he gives except of nervous excitement) he appears to place most confidence in the stimulating practice. In corroboration of this view, he mentions that Epilepsy and Asthenia (when they cannot be traced to any distinct violation) are most effectually cured by tonics and Stimulants; and even Tetanus itself has been overcome by repeated draughts of strong liquors.

The description of the disease, as given by Dr James Schuster, differs so little from that of Dr Gualter, that it is unnecessary to state it here.

He coincides with him also in not attributing it to an increased secretion of Bile; and inveighs bitterly against those who consider the generality of the diseases of Warm Climates as dependent upon that cause. He enters at some length into a discussion to prove this point. I will give one of his arguments in his own language.

"Now it seems to me somewhat obvious, that if an increased secretion of Bile were the Cause of the disease, we should see nothing of it



"At some time after the effects become obvious" (When is this increased  
"secrection at the time?" Not in the Stomach, for it discharges its  
"contents long before; and no signs of Bile. It is not in the Spleen  
"lines for the stools are themselves thin and watery. At length pure Bile  
"makes its appearance; and lo! it is accused of being the cause of all."

He differs however from him in the treatment; he recommending repeated  
and large doses of Calomel and Opium to increase the secretion of the  
bowels, and to quiet spasmodic action: give the warm bath and blisters to  
induce perspiration and excite the skin to the performance of its proper  
functions.

We have also accounts of Cholera, as occurring in the Isle of France in  
the year 1649, from two different persons, Dr. Keenan and C. Telfair Esqrs.  
That of the former corresponds very nearly with that of Doctors Cullen and  
Johnson, differing but slightly in his practice from the latter. Mr  
Telfair appears to have been frightened into his account. I will give  
an extract in his own words.

"The Medulla becomes distended like a drum, all digestions cease, the  
"closters, which are thrown up are retained, the medicines, which are  
"swallowed and the liquors, are not vomited, notwithstanding the  
"convulsive efforts of the patient." This part of his portrait is in direct





variance with that of Dr. Harris, who speaks of the disease as happening  
at the same time and in the same place, and also with that of every  
writer upon the complaint. Dr. Harris states that seeing there is little  
scope of cure in cases of his, prevalent in the country, when keeping  
in mind the good old adage, "an ounce of prevention is worth a  
pound of cure," he commenced giving his negroes better and more sub-  
stantial food; he also treated them once a week to a dose of Calomel,  
and twice a week to a quantity of salt water taken from the Sea  
and then by way of purgatives. He concludes his remarks by stating,  
that he considers Cholera as highly contagious, but that he keeps his  
opinion to himself.

Dr. Harris has suffered nothing in his subsequent returns, and the  
mode of treatment has been little changed, from that recommended by  
Dr. Johnson.

In the year Eighteen hundred and twenty one, during a residence  
of eight months in Cuba. I had many opportunities of witnessing,  
it in its most epidemic form. Some time after our arrival, the  
weather being extremely warm, a boat was despatched in the morning  
from Havana to Cauto, a distance of fifteen miles, which returned



the same afternoon. One of the sailors employed in unloading sea stores  
tying down the ship, was seized with this Colic. He at first  
complained with a shock or jerking in the stomach, and  
sweat in the face of the stomach, with a constant inclination to  
stool; when nothing was visible in the bowels, remembering that  
is the first form of dysentery. Some time after this, some more  
of his appearance, and at once instantly vomiting began, when the  
nausea, taken and the same kind of uneasy motion was spread  
from the stomach. From that moment nothing was retained after  
it was swallowed. In this situation it continued nine hours  
after which it was followed by pain and spasms, and breathed his last  
the pressure of the spasms to be removed by the troches of the Spasms.  
This being the first case no suspicion was entertained of its  
character. Fifteen grains of Calomel were administered, and  
no further attention was paid him till spasms and vomiting would  
show on board to the nature of the attack. Laudanum and Cal-  
omel were now given and dysentery excited. Hot fisticles wet with  
vinegar were placed under the bed clothes, and the surface of the  
body marked with hot punctations. Large draughts of hot brandy



toddy with cloves steeped in it was, even, not in vain, every thing  
was done, which fear would suggest, but all to no purpose. The man  
died in a little more than ten hours after he first complained of  
indisposition.

The morning after the death of this man an old friend who  
supplied our ship with provisions, mentioned that he had a new  
finding out for the disease. When being mentioned he informed  
us that simply stopping the circulation of the blood in our arm  
and a single dose of medicine were sufficient to overcome the  
disease in its worst form.

In a few days we had an opportunity of testing the remedy, and  
would do no harm if it did us good. There in the evening a Portuguese  
on board of our own vessel, who did not imagine he was worth  
till shadows and coming pain made their attacks.

He immediately was applied to the left arm, and the circulation com-  
pletely stopped. The patient shortly after was relieved from pain  
and the medicine taken (Castor Oil) remained upon the stomach  
without causing the slightest nausea. Upon its operating the tumor  
out was removed, and a second dose of Oil was administered.









direction through the atmosphere. The first opinion I shall pass  
by in silence. The second has been refuted by Dr Johnson; so  
that the third and last that has been offered is the only one that  
stands on any foundation. We are assuming however into the situations  
when, and periods at which it occurred; I think it well observed  
that it is unconnected with the direction of the winds or the state  
of the atmosphere. In the year Eighteen hundred and eighth the  
Chidonic prevailed equally on both the Malabar and Cochin  
coasts; their climates at the same time being totally different. The  
coast is deluged with rain for some months, while the other is free  
from any; we receive the cooling breeze from the sea, while the  
other is burning up from the parched air from the land, amounting  
almost to a hurricane raising with it the sand of the neighbouring  
desert. Yet under circumstances so different, and in situations  
so distant, the disease is equally violent and to the same dea-  
mining extent.

Whether may be the remote cause the proximate cause is a shock  
of perspiration subsequent collapse and consequent in action of the  
blood in the veins of the system. Not on this I would depend for



a source not of benefit, as shown in some of the various  
epidemics, and the same, but of oppression, caused by the frequent  
administration of food in the different persons, and particularly in  
those connected with the fatal consequence. It was in 1811 that  
it appeared the cause of the epidemic; the ultimate connection, how-  
ever, between the cause and the disease is direct, at least it may  
have the best solution.

The disease was very general, appearing in various parts  
of the country, and was attended with a variety of symptoms  
of the inflammatory kind, with enlarged action of the heart and  
arteries together with a direct increased action of the menta-  
lity together & was finally unable to appear in a healthy state. Yet the  
disease, & every one who has treated of this epidemic is con-  
vinced as the cause. This directly appears to me to be the  
cause of Ignorance, to which every one who is in want of an  
opinion has been made to refer. I have seen a  
man at the point of death one day, looking upon a large pile  
the next. Could this disease be called one of bodily?

The effects of this epidemic would that the means employed to



could a doctor well point out the nature, Stage, at the same  
time, that it is only to be subdued by Opium, Stimulants and  
Narcotics. That it has been cured by tonics, no truly recorded  
case, and also that it has been overcome by any Staccato expec-  
tation. That in the commencement of an attack Stimulants never  
succeeded with grant, but these have always been in a diffusive  
nature, and is this properly to be attributed <sup>then</sup> to the know the diffusive  
stimuli create a general action throughout the whole system, instead  
instantaneously; thus coalesce the functions, and excite the functions  
of the Skin. In the same manner would it account for the effect  
of Opium. We give Opium in the cold stage of an intermittent,  
and its efficacy no one will dispute; it acts here as a diffusive.  
But calling it has been resorted to during the Hot stage of the same  
disease, and has been found, by new, practitioners of medicine in  
this city, to afford the most certain relief. We must here again refer  
to the general to the diffusive properties, and not to its stimulating  
and narcotic character. Again, resorting in the commence-  
ment of an attack of Cholera is not efficacious as it has been  
shown by repeated cases. All these remedies however, not after



the use and retention of any one in the same position. In the state I am now bloodletting extensively the almost entire temporary: not to the extraneous very different. Now the blood has become thicker and, and in the process of time certainly sufficient remains in the external portion. In the case is evident the role of those cases which very often among the external states of disease, from the warm bath &c. a reaction can be produced. Then the most beneficial results may be obtained from resuscitation. Smothers has also been resorted to in the commencement with limited advantage.

The idea of its being removed, was an almost universal opinion. But at present but few disagree. The following statement is the statement of a Mr. Taylor was included in the London Review, by a British Voyage from the island of England and that consequently it must be convincing. The statement is just what I should have expected after the very fact and in his own mind could account to him, even as of the disease. Admitting it to him him conveyed by the Voyage to the island, I can see no necessary conclusion that to be a sign of the disease, or of the disease. We have many accounts of the introduction of the disease from

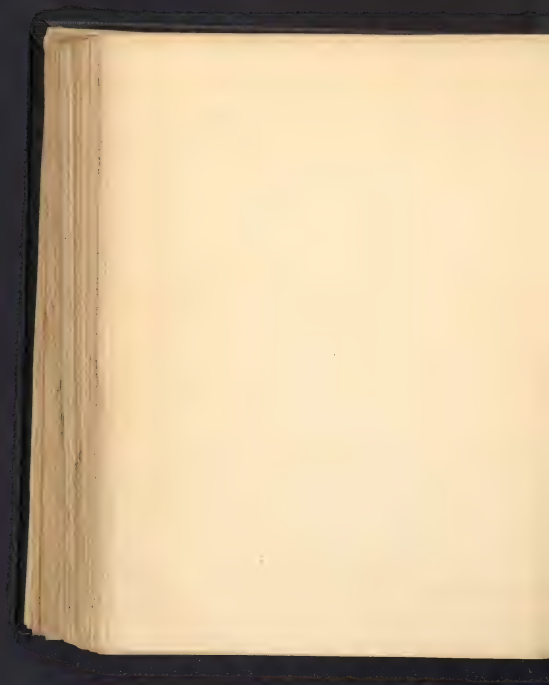












disease as contagion, upon which our Omnipotent and most  
bountiful Creator has not set an outward mark as visi-  
ble as that imprinted upon the forehead of Cain—

